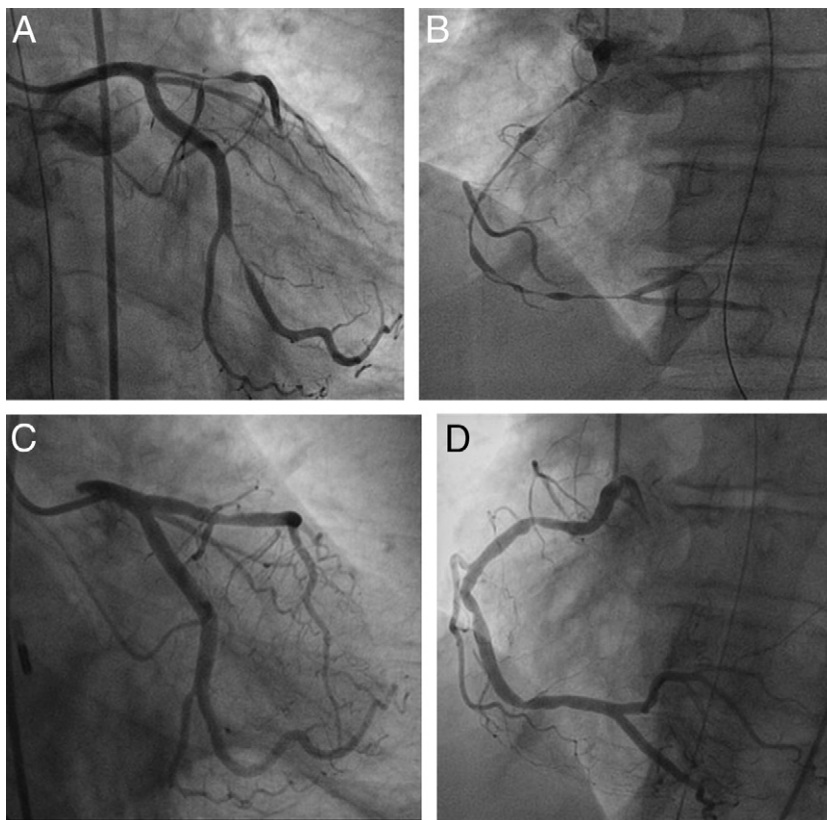


## IMAGES IN CARDIOLOGY

# Severe Multivessel Coronary Vasospasm Presenting as Acute ST-Segment Elevation Myocardial Infarction

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A 60-year-old woman was brought to the emergency room after acute onset chest pain and shortness of breath developed while she was shopping. Her medical history was significant for migraine headaches. Her home medications were sumatriptan and ibuprofen. A 12-lead electrocardiogram showed ST-segment elevation in leads II, III, aVF, and V<sub>2</sub> through V<sub>6</sub>. Urgent coronary angiography revealed severe stenosis of the proximal left anterior descending artery and the second obtuse marginal artery, and a totally occluded mid left anterior descending artery (A). Diffuse and extensive stenoses of the right coronary artery were also noted (B). Intracoronary administration of nitroglycerin led to complete resolution of all stenoses (C and D). The patient remained stable throughout her hospital stay and was discharged home 4 days later on a regimen of amlodipine 10 mg and isosorbide mononitrate 30 mg daily. She was advised to stop taking sumatriptan.